

Patent Cooperation Treaty

Appointment of Agent

The undersigned applicant hereby appoints:

Lawrence L. Limpus Reg. No. 27,816

Jeffrey S. Boone Reg. No. 29,284

all of:

Mallinckrodt Inc.

675 McDonnell Boulevard

St. Louis, Missouri 63042

United States of America

Telephone Number: 314.654.3778

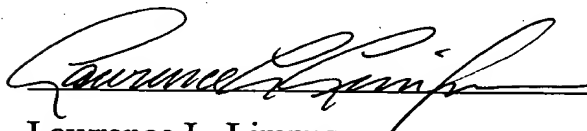
Facsimile Number: 314.654.3156

as agents to act on its behalf before the competent International Authorities in connection with any and all international applications filed by it and to receive payments on its behalf.

At: St. Louis, Missouri, United States of America

Date: 31 MARCH 1999

Mallinckrodt Inc.



Lawrence L. Limpus

Assistant Secretary

FOSTER 882ET660

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing  
OR  
☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	1292 WO/US
First Named Inventor	ALBERTO, Roger
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMBINATION OF INTERCALATING ORGANOMETALLIC COMPLEXES  
AND TUMOR SEEKING BIOMOLECULES FOR DNA CLEAVAGE AND  
RADIO THERAPY

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 02/24/2000 as United States Application Number or PCT International

Application Number EP00/01553 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
60/121340 99200754.2	USA Prov.	02/24/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	EP	03/12/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

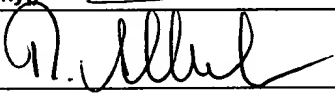
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/>		Customer Number or Bar Code Label		OR <input checked="" type="checkbox"/> Correspondence address below	
Name <u>Jeffrey S. Boone</u>					
Address <u>675 McDonnell Boulevard, P.O. Box 5840</u>					
City <u>St. Louis</u>			State <u>MO</u>		ZIP <u>63134</u>
Country <u>USA</u>		Telephone <u>314-654-8955</u>		Fax <u>314-654-3156</u>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR :			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <u>Roger Ariel</u>			Family Name or Surname <u>ALBERTO</u>		
Inventor's Signature 			Date <u>20.7.01</u>		
Residence: City <u>Winterthur</u>		State	Switzerland Country	Switzerland Citizenship <u>CH</u>	
Mailing Address <u>St. Georgenstrasse 54</u>					
City <u>Winterthur</u>		State	CH-8400 ZIP	Switzerland Country	
NAME OF SECOND INVENTOR :			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <u>Pascal Jean-Marie</u>			Family Name or Surname <u>HAFLIGER</u>		
Inventor's Signature			Date		
Residence: City <u>Zurich</u>		State	Switzerland Country	Switzerland Citizenship	
Mailing Address <u>Guggacherstrasse 42</u>					
City <u>Zurich</u>		State	CH-8006 ZIP	Switzerland Country	
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

**SECRET**

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing      OR      ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Dock Number	1292 WO/US
First Named Inventor	ALBERTO, Roger
<b>COMPLETE IF KNOWN</b>	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**COMBINATION OF INTERCALATING ORGANOMETALLIC COMPLEXES  
AND TUMOR SEEKING BIOMOLECULES FOR DNA CLEAVAGE AND  
RADIO THERAPY**

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 02/24/2000 as United States Application Number or PCT International

Application Number EP00/01553 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
60/121340 99200754.2	USA Prov. EP	02/24/1999 03/12/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

00913788.061501

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION — Utility or Design Patent Application**Direct all correspondence to: ☐ Customer Number or Bar Code Label ☐ OR ☒ Correspondence address belowName Jeffrey S. BooneAddress 675 McDonnell Boulevard, P.O. Box 5840City St. LouisState MOZIP 63134Country USATelephone 314-654-8955Fax 314-654-3156

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name (first and middle [if any]) Roger ArielFamily Name or Surname ALBERTO

Inventor's Signature

Date

Residence: City Winterthur

State

Country SwitzerlandCitizenship SwitzerlandMailing Address St. Georgenstrasse 54City Winterthur

State

ZIP CH-8400Country SwitzerlandNAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventorGiven Name (first and middle [if any]) Pascal Jean-MarieFamily Name or Surname HAFLIGER

Inventor's Signature

Date 300701Residence: City Zurich

State

Country SwitzerlandCitizenship SwitzerlandMailing Address Guggacherstrasse 42City Zurich

State

ZIP CH-8006Country Switzerland☐ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

0991378-021501

2-w

CHX